### **FORM D**

#### **UNITED STATES**

# SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

## FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

11362	34
OMB API	PROVAL
OMB Number:	3235-0076
Expires:	May 31, 2008
Estimated average hours per respon	
SEC USI	E ONLY
Prefix	Serial

DATE RECEIVED

Name of Offering ( check if this is an amendment and name has changed, and indicate change.)  Series B-1 Preferred Stock Financing	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506  Type of Filing: Amendment	Section 4(6) ULOE
A. BASIC IDENTIFICATION DATA	E (ABAN) ETRA MANI ENSE (AND MARK INDICATOR AND COM
1. Enter the information requested about the issuer  Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)  NextPage, Inc.	07087879
Address of Executive Offices (Number and Street, City, State, Zip Code) 13997 South Minuteman Drive, Draper, Utah 84020	Telephone Number (Including Area Code) 801.748.4400
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business Information Risk Management	PHOCESSED
Type of Business Organization	√
	THOMSON (please sifflyANCIAL
Actual or Estimated Date of Incorporation or Organization:    Month   Year	Actual Estimated

#### GENERAL INSTRUCTIONS

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

<del></del>		A. BASIC IDI	ENTIFICATION DATA		
<ul><li>Each beneficial own</li><li>Each executive office</li></ul>	e issuer, if the issuer ha er having the power to	as been organized within the vote or dispose, or direct the orate issuers and of corporat	vote or disposition of, 10%	or more of a class of eq ners of partnership issue	uity securities of the issuer; rs; and
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if Lamont, Ann H.	`individual)				
Business or Residence Addres	,				
c/o Oak Investment Partner Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				Managang I andrei
Business or Residence Addres			.k. CA 94596		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if Harkness, David	individual)				
Business or Residence Address c/o AK Holding Company, 2			04		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if Lee, Darren	`individual)				
Business or Residence Address c/o NextPage, Inc., 13997 So					
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer		General and/or Managing Partner
Full Name (Last name first, if	individual)				
Allred, Doug  Business or Residence Addres c/o NextPage, Inc., 13997 So	•	• • • • • • • • • • • • • • • • • • • •			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if Shields, Craig	individual)		-		
Business or Residence Addres	•				
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Oak Investment Partners ar	nd affiliated entities				
Business or Residence Addres	•	t, City, State, Zip Code)			
One Gorham Island, Westp		shoot on com	litional agains - fithis -t	aa naagaan - \	
	(Use blank	sheet, or copy and use add	imonal copies of this sheet	, as necessary)	

	A.	BASIC IDE	NTIFICATIO	N DATA		
<ul> <li>Enter the information requested</li> <li>Each promoter of the issuer,</li> <li>Each beneficial owner having</li> <li>Each executive officer and d</li> <li>Each general and managing p</li> </ul>	if the issuer has been g the power to vote of irector of corporate is	r dispose, or direct the suers and of corporate	vote or dispositi			
Check Box(es) that Apply:	Promoter 🛛	Beneficial Owner	☐ Executive	Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individ	ual)					
AK Holding Company						
Business or Residence Address (Num		State, Zip Code)				
251 River Park Dr., Suite 350, Prov	o, UT 84604					
Check Box(es) that Apply:	Promoter 🛛	Beneficial Owner	Executive	Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individ	ual)					
Dominion Fund and affiliated entiti	ies					
Business or Residence Address (Num	ber and Street, City,	State, Zip Code)				
1656 North California Blvd., Suite	300, Walnut Creek	, CA 94596				
Check Box(es) that Apply:	Promoter 🗵	Beneficial Owner	☐ Executive	Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individ	ual)					
Amp Capital Partners and affiliate	d entities					
Business or Residence Address (Num	ber and Street, City,	, State, Zip Code)				
510 Waverley St., Palo Alto, CA 94.	301					
Check Box(es) that Apply:	Promoter 🖾	Beneficial Owner	☐ Executive	Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individ	ual)					
ePartners2 and affiliated entities		· · · · · · · · · · · · · · · · · · ·				<del></del>
Business or Residence Address (Num 14 Flood Walk, SW3 5RG, London,	•	, State, Zip Code)				
Check Box(es) that Apply:	Promoter 🛛	Beneficial Owner	Executive	Officer 🗌	Director [	General and/or Managing Partner
Full Name (Last name first, if individ	ual)					
TAM Capital Management and affi	iliated entities					
Business or Residence Address (Num 38 Miller Avenue, #295, Mill Valley		, State, Zip Code)				
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive	Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individ	ual)					
Business or Residence Address (Num	ber and Street, City,	State, Zip Code)				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive	Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individ	ual)	·				
Business or Residence Address (Num	ber and Street, City,	State, Zip Code)				
	(Use blank sheet,	or copy and use add	itional copies of	this sheet, as no	ecessary)	

					В.	INEOD	MATION A	A ROUT OF	CEEDINC				
				<del></del>	D,	IMPOR	MATION	ABOUT OF	TERINO			Yes	No
1.	Has the	issuer sold,	or does the i	ssuer intend	to sell, to no	n-accredited	investors in t	his offering?	·	.,			$\boxtimes$
_								-	ander ULOE.			*****	
2.	What is	the minimu	m investmen	t that will be	accepted fro	om any indiv	idual?					\$ <u>N/A</u> Yes	 No
3.	Does th	e offering p	ermit joint o	wnership of a	single unit?	14-11-11-11-11-1	*****************					⊠	Ξ̈́
				for each perso ourchasers in o									
				aler registered									
	than fiv dealer o		s to be listed	are associate	d persons of	such a broke	r or dealer, ye	ou may set fo	orth the inforr	nation for th	at broker or		
Full N			st, if individ	ual)					· -				· · · · · · · · · · · · · · · · · · ·
	N/A						<del></del>						
Busir	ness or F	Residence A	idress (Num	ber and Stree	t, City, State	, Zip Code)							
Name	e of Ass	ociated Brol	er or Dealer	<del></del> .		· · · · · · · · · · · · · · · · · · ·							
States	s in Whi	ich Person L	isted Has So	licited or Inte	ends to Solic	it Purchasers	1						
(C	heck "A	Il States" or	check indivi	duals States)	••••••	•	***************************************					□ A	II States
[/	AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[1D]
[]	IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[[MA]	[MI]	[MN]	[MS]	[MO]
[]	MTJ	[NE]	[NV]	[HM]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[1	RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full 1	Name (L	ast name fir	st, if individ	ual)									
	N/A	Pecidence A	drace (Num	ber and Stree	t City State	Zin Code)							
Dusti	1033 01 1	cestactice re	Adress (IValli	bei and Sace	t, City, Dian	, zip code)							
Name	e of Ass	ociated Brol	er or Dealer				•						
States	s in Whi	ich Person I	isted Has So	licited or Inte	ends to Solic	it Purchasers						<u> </u>	
				duals States)								Па	Il States
	AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
•	_	, ,							, ,	•	• •		
-	IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[[MA]	[MI]	[MN]	[MS]	[MO]
-	MT]	[NE]	[NV]	(NH)	[NJ]	[NM]	(NY)	[NC]	[ND]	[OH]	{OK}	[OR]	[PA]
Įı	RI]	[SC]	[SD]	[TN]	(TX)	(UT)	[VT]	(VA)	[WA]	[WV]	[WI]	[WY]	[PR]
Full N	Name (L	ast name fir	st, if individ	ual)									
	N/A												
Busin	iess or R	Residence Ad	Idress (Num	ber and Stree	t, City, State	, Zip Code)							
					<del></del> .			····	<u></u>				
Name	e of Asse	ociated Brok	er or Dealer										
				licited or Inte	nds to Solic	it Purchasers							
States	s in Whi	ich Person L	isted Has So					,				□ AI	l States
States (C	s in Whi	ich Person L	isted Has So	licited or Inte				[DE]	[DC]	[FL]	[GA]	AI	States
States (C	s in Whi heck "A	ich Person L	isted Has So check indivi	licited or Inte					[DC]	[FL]	[GA] [MN]		
States (C)	s in Whi heck "A AL]	ich Person L II States" or [AK]	isted Has So check indivi [AZ]	licited or Inte duals States) [AR]	[CA]	[CO]	[CT]	[DE]				[H1]	[ID]

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE	UF PR	OCEEDS		
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \( \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
			gregate		t Already
	Type of Security		ing Price		Sold
	Debt			\$	0
	Equity	\$ <u>5,283.</u>	425.00	\$ <u>3,841</u>	,961.52
	Common Preferred				
	Convertible Securities (including warrants)	\$	0	\$	0
	Partnership Interests	<b>S</b>	0	<b>S</b>	0
	Other (Specify)	\$	0	<b>\$</b>	0
	Total	\$ <u>5,283</u> .	425.00	\$ <u>3,841</u>	,961.52
	Answer also in Appendix, Column 3, if filing under ULOE.				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
			ımber restors	Dollar	regate Amount urchase
	Accredited investors		5	\$ <u>3,841</u>	,961.52
	Non-accredited Investors		0	\$	0
	Total (for filings under Rule 504 only)			s	
	Answer also in Appendix, Column 4, if filing under ULOE.		_	<b>-</b>	
	Answer also in Appendix, Column 4, it ming under OLOE.				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.				
	m com t	-	pe of		Amount
	Type of Offering Rule 505		curity N/A	•	Sold
	Regulation A			Ψ	
	-		N/A	J	
	Rule 504		N/A	\$	
	Total		N/A	2	
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees			<b>\$</b>	
	Printing and Engraving Costs			<b>s</b>	
	Legal Fees		$\boxtimes$	\$105,0	00
	Accounting Fees		$\Box$	s	
	Engineering Fees			s	
	Sales Commissions (specify finders' fees separately)			· · · · · ·	
	Other Expenses (identify)			پ د	•
				#	nn
	Total		$\boxtimes$	<u>0,cur</u> ¢	00

		RING PRICE, NUMBER OF INVESTORS, EXPENSES AND		·
	total expenses furnished in response to	gregate offering price given in response to Part C - Question 1 and Part C - Question 4.a. This difference is the "adjusted gross	d	\$ <u>5,178,425.00</u>
5.	the purposes shown. If the amount for	ted gross proceeds to the issuer used or proposed to be used for each any purpose is not known, furnish an estimate and check the box to syments listed must equal the adjusted gross proceeds to the issuer 4.b above.	the	
			Payments to Officers, Directors & Affiliates	Payments To Others
	Salaries and fees		S	□ \$
	Purchase of real estate		\$	s
	Purchase, rental or leasing and installa	ation of machinery and equipment	□ <b>s</b>	<b>\$</b>
	Construction or leasing of plant build	ings and facilities	□ <b>s</b>	<b>S</b>
	Acquisition of other businesses (incluused in exchange for the assets or section)	ding the value of securities involved in this offering that may be urities of another issuer pursuant to a merger)		s
	Repayment of indebtedness		<b>s</b>	□ s
	Working capital	·	□ s	<b>S</b> \$5,178,425.00
	Other (specify):		s	<b>S</b>
	Column Totals		s	<b>∑</b> \$ <u>5,178,425.00</u>
	Total Payments Listed (column	otals added)	<b>⊠</b> \$ <u>5,178,4</u>	25.00
		D. FEDERAL SIGNATURE		
_				
ınde		ned by the undersigned duly authorized person. If this notice is filed undersigned Exchange Commission, upon written request of its staff 2) of Rule 502.		
unde	rtaking by the issuer to furnish the U.S. S	Securities and Exchange Commission, upon written request of its staff 2) of Rule 502.	, the information furnished	
unde accre Issu Nex	rtaking by the issuer to furnish the U.S. Sidited investor pursuant to paragraph (b)	Securities and Exchange Commission, upon written request of its staff 2) of Rule 502.	, the information furnished	

Intentional Misstatements or Omissions of Fact Constitute Federal Criminal Violations. (See 18. U.S.C. 1001.)

END